

RECEIVED

COMMONWEALTH OF KENTUCKY
BEFORE THE PUBLIC SERVICE COMMISSION MAY 11 2004

PUBLIC SERVICE
COMMISSION

In the Matter of:

APPLICATION OF ALLTEL COMMUNICATIONS,
INC. FOR A CERTIFICATE OF PUBLIC
CONVENIENCE AND NECESSITY TO
CONSTRUCT A CELL SITE AT 543 BASEBALL
HILL ROAD, OFF KENTUCKY STATE ROUTE 207,
NEAR THE ARGILLITE AREA IN SOUTHEASTERN
GREENUP COUNTY, KENTUCKY

(ARGILLITE SITE)

CASE NO. 2004-00161

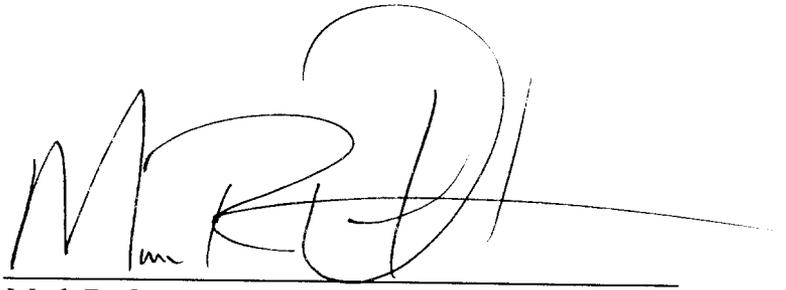
**SUPPLEMENT TO APPLICATION FOR A
CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY**

ALLTEL Communications, Inc. ("ALLTEL") hereby supplements its May 11, 2004 Application for a Certificate of Public Convenience and Necessity to Construct a Cell Site as follows:

1. Paragraph 6 of the Application is supplemented with the return receipt evidencing delivery of the notice to the Honorable Robert W. Carpenter, Greenup County Judge Executive, delivered May 8, 2004. (**Exhibit 1**).

2. Paragraph 7 of the Application is supplemented with the return receipts evidencing delivery of the notices to the following property owners: (1) Bobby and Judy Thompson, delivered May 8, 2004; (2) Jim Belt, delivered May 8, 2004, (3) Dwayne May, delivered May 10, 2004; (4) Addington Land Company, LLC, delivered May 10, 2004; (5) Hubert Myers, delivered May 8, 2004 and (6) Greenup County Fiscal Court, delivered May 8, 2004. (**Exhibit 2**).

Dated this the 11th day of May, 2004.

A handwritten signature in black ink, appearing to read 'MR Overstreet', with a long horizontal line extending to the right from the end of the signature.

Mark R. Overstreet
STITES & HARBISON PLLC
421 West Main Street
P.O. Box 634
Frankfort, KY 40602-0634
Telephone: (502) 223-3477
COUNSEL FOR:
ALLTEL COMMUNICATIONS, INC.

EXHIBIT

1

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Honorable Robert W. Carpenter
Greenup County Judge Executive
102 Greenup County Courthouse
301 Main Street
Greenup, KY 41144

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

Ann Rash

5-8-01

C. Signature

x Ann Rash

- Agent
 Addressee

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type

- Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Copy from service label)

7099 3400 0006 9718 0924

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Bobby & Judy Thompson
 HC 61 Box 101
 Argilite, KY 41121

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) Judy Thompson B. Date of Delivery 5-8-04

C. Signature Judy Thompson Agent Addressee

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.
4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Copy from service label)
7099 3400 0006 9718 0986

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jim Belt
 HC 61 Box 102
 Argilite KY 41121

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) Jim Belt B. Date of Delivery 5-8-04

C. Signature Jim Belt Agent Addressee

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.
4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Copy from service label)
7099 3400 0006 9718 0979

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (Please Print Clearly)	B. Date of Delivery
	<p><i>Oreta May</i> <i>5-10-04</i></p>	
1. Article Addressed to:	C. Signature	
	<p><i>Oreta May</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p>	
<p style="text-align: center;">Dwayne May HC 61 Box 10 Argilite, KY 41121</p>	D. Is delivery address different from item 1? If YES, enter delivery address below:	
	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
2. Article Number (Copy from service label)	3. Service Type	
	<p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes		
<p><i>7099 3400 0006 9718 0962</i></p>		
PS Form 3811, July 1999	Domestic Return Receipt	102595-99-M-1789

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (Please Print Clearly)	B. Date of Delivery
	<p><i>Christine Thomas</i> <i>5/10/04</i></p>	
1. Article Addressed to:	C. Signature	
	<p><i>Christine Thomas</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p style="text-align: center;">Addington Land Company LLC 1500 North Big Run Road Ashland KY 41102</p>	D. Is delivery address different from item 1? If YES, enter delivery address below:	
	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
2. Article Number (Copy from service label)	3. Service Type	
	<p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes		
<p><i>7099 3400 0006 9718 0955</i></p>		
PS Form 3811, July 1999	Domestic Return Receipt	102595-99-M-1789

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Received by (Please Print Clearly) NANCY MYERS B. Date of Delivery 3-8-04</p> <p>C. Signature Nancy Myers <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Hubert Myers HC 61 Box 230 Argilite KY 41121</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Copy from service label) 7099 3400 0006 9718 0948</p> <p>PS Form 3811, July 1999 Domestic Return Receipt 102595-99-M-1789</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Received by (Please Print Clearly) Ann Rash B. Date of Delivery 5-8-04</p> <p>C. Signature Ann Rash <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Greenup County Fiscal Court Greenup County Courthouse 301 West Main Street Greenup, KY 41144</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Copy from service label) 7099 3400 0006 9718 0931</p> <p>PS Form 3811, July 1999 Domestic Return Receipt 102595-99-M-1789</p>	